

## ISSUE SLIP STAPLE AREA (for additional cross references)

8/03

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>	SC		
<b>FORMALITY REVIEW</b>		65918	10/27/00
<b>RESPONSE FORMALITY REVIEW</b>			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral) ... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	11/21/00
2	✓ ✓ ✓ ✓
3	✓ ✓
4	✓ ✓
5	✓ ✓
6	✓ ✓
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Claim	Date
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Claim	Date
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1ST AVAILABLE COPY If more than 150 claims or 10 actions  
staple additional sheet here

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